

(1) Person Filing: _____
 Mailing Address: _____
 City, State, Zip Code: _____
 Daytime / Evening Phone: _____ / _____
 In this case I am a: ☐ Petitioner ☐ Respondent ☐ Represented by Attorney
 Attorney Name: _____ Bar No.: _____

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

(3) _____
 Petitioner/Plaintiff (in original case)

(2) Case No. _____
 ATLAS No. _____

 Respondent/Defendant (in original case)

**REQUEST FOR HEARING
 RE: EX PARTE ORDER OF
 ASSIGNMENT A.R.S. § 25-504**

**THIS FORM IS NOT TO BE USED TO REQUEST A CHANGE IN YOUR EXISTING SUPPORT ORDER.
 THIS FORM ONLY APPLIES TO THE EX PARTE ORDER OF ASSIGNMENT.**

(3) I, _____ ask the court to set a hearing within ten (10) days before the Ex Parte Order of Assignment becomes binding on my first employer/payor served with the Ex Parte Order of Assignment. This Request is filed within **SEVEN DAYS** from the date the Request for Assignment, Ex Parte Order of Assignment and Notice were delivered to me.

(4) This Request for Hearing is based on the following statement(s) regarding the Ex Parte Order of Assignment. (Check all boxes that apply)

- valid. ☐ The person named in the Ex Parte Order is not me (Mistaken Identity).
☐ The amount shown in the Ex Parte Order is incorrect or has been modified.
☐ The child support or spousal maintenance order has been dismissed or is no longer
☐ The current child support or spousal maintenance is no longer owing.
☐ All arrearages/interest have been paid/satisfied and are no longer owing.

(5) ☐ I request the Court to order the Support Payment Clearinghouse to hold any payments received pursuant to the Ex Parte Order of Assignment until after the hearing. I realize that this hold will not be instant and that monies will continue to be sent out until a judicial determination is made.

By signing this form I state to the Court, under penalty of perjury, the information I have given is true and correct.

(6) _____
 Date

 Signature of Requesting Party